P	POSITION DESCRIPTION (Please Read Instruction on the Back)													1. Agency Position No. S0000A4						
2. Reason for Submission 3. Service							4. Emplo	4. Employing Office Location			5. Duty Station						6. OPM Certification No.			
x	Redescription		X New Hdqtrs. X Fleid																	
	Reestablishment	Reestablishment Other						7. Fair Labor Standards Act			8. Financial Statements Required					9. Subject to IA Action				
Explanation (Show any positions repraced)								Nonexempt	<u> </u>	Executive Po	closure	F	mploymen inancial int	t and lerests	X Yes	[No			
SOD for SPD#S000004 10. Position Status										11.	Position is:	Ь,	ensitivity - Non	Г Т а.	Critical	13. Comp	etitive i	evel Code		
X Competitive Excepted (Specify In.										Supervisory Sensitive Sensitive							14. Agency Use			
SES (Gen.)											2- Noncritical 1 - 4- Special									
15. Classified/Graded by Dc9/3/threite of T									FRT Sne	olo		99	mbata pa	2242		Initials		Date		
	U.S. Office of Personnel Managemen				٦	This PD	has been Firefights	approved a	as follows Law Enfo	un	der 5 U	36∕8	336(c)	and 8	412(d)					
b. 1	Department, Agency	,			<u></u>		.r.rengrits .Primary	41.70			/ 0		····	*						
	or Establishment				Ā	Approval			Secondan		mbe	فارك	2,30	580 	/Supvy					
c. Second Level Review														-						
d. 1	d. First Level Review Fire Management Officer									G	IS	04	01		11					
e. Recommended by Supervisor or Initiating Office																				
16. Organizational Title of Position (If different from official title)									17.	Name of Em	ployee	(if vacant,	specify)	·					
18. Department, Agency, or Establishment									c. Third S	c. Third Subdivision										
Department of the Interior									į											
a. First Subdivision									d. Fourth	d. Fourth Subdivision										
U.S. Fish and Wildlife Service										Fib. O. b. d. d.										
b. Second Subdivision Regions									e. Fifth Su	e. Fifth Subdivision										
 Employee ReviewThis is an accurate description of the major duties and responsibilities of my position. 									Signature of Employee (optional)											
20. Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the								to ap	knowledge that this information is to be used for statutory purposes relating to appointment and payment of public funds, and that false or misleading statements may constitute violations of such statutes or their implementing regulations.											
a. Typed Name and Title of Immediate Supervisor								b. Typed	b. Typed Name and Title of Higher-Level Supervisor or Manager (optional)											
Signature Date							Date	Signature	Signature					Date						
								<u>i </u>	100 5 11		51						<u>i</u>			
6	Classification/Jo classified/graded dards published b standards apply d ded Name and Title	as ire	requir the U.S. ctly, con	ed by Office sistent	Title 5, of Per ly with	U.S. Code	e, in conform magement or	nance with sta . if no publish	n- Ser.	D	Classification ef.fo	r G	S-401;	GS-	460,	1/99.	on -			
									Informa	tio-	for Emple		The ct	andarda	and info	mation c	a their	annliastic-		
Signature									are avail and corr mation FLSA, i	Information for Employees. The standards, and information on their application, are available in the personnel office. The classification of the position may be reviewed and corrected by the agency or the U.S. Office of Personnel Management. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the U.S. Office of Personnel Management.										
23.	Position Review			Initials		Date	Initials	Date	Initials		Date		Initials		Date	Initials		Date		
a. E	Employee (optiona	ıl)			i			i i		i				i			i			
b. 8	Supervisor									I	•			Į Į						
c. (Classifier					•														
F	Remarks PL GS-12.															<u> </u>				
	ower as GS upervision		тт.	rer	LOT	ıs KINC	re or a	ictes as	attache	=a	քս, ու	יייייייייייייייייייייייייייייייייייייי	M.	M.	A	Al	7-1	12.02		
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25. Description of Major Duties and Responsibilities (See Attached)